PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/088,263-Conf. #5112 **Application Number** March 18, 2002 **FEE TRANSMITTAL** 

Filing Date

| For FY   | First Named Inventor |                    | Michammed A. Abdellatif     |                                       |                             |             |                          |
|--|----------------------|--------------------|-----------------------------|---------------------------------------|-----------------------------|-------------|--------------------------|
|  | Examiner Name        |                    | A. J. Daniels               |                                       |                             |             |                          |
| Approant dame eman entry   | Art Unit             |                    | 2615                        |                                       |                             |             |                          |
| TOTAL AMOUNT OF PAYMENT (\$) 185.00  |                      |                    | Attorney Docket No. KKI-004 |                                       |                             |             |                          |
| METHOD OF PAYMENT (che   | ck all that ap       | iply)              |                             |                                       |                             |             |                          |
| Check Credit Card  | Money                | Order No           | ne Oth                      | ner (please iden                      | tify):                      |             |                          |
| X Deposit Account Deposit Account  | int Number: 18       | -0013 Deposit Ac   | count Name:                 | Rader,                                | Fishman & Gra               | auer PLLC   | <u> </u>                 |
| For the above-identified de  | eposit accou         | nt, the Director i | s hereby author             | orized to: (che                       | ck all that apply)          |             |                          |
| x Charge fee(s) indica   | ted below            |                    | Ch                          | arge fee(s) ind                       | dicated below, ex           | cept for th | he filing fee            |
| Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17  |                      |                    |                             |                                       |                             |             |                          |
| FEE CALCULATION  |                      | -                  |                             |                                       |                             |             |                          |
| 1. BASIC FILING, SEARCH, AND   | EXAMINAT             | ION FEES           |                             |                                       |                             |             |                          |
| •  |                      | <u>  Entity</u>    | ARCH FEES<br>Small Ent      | ity                                   | NATION FEES<br>Small Entity |             |                          |
|  |                      | e (\$) Fee (\$     |                             | · · · · · · · · · · · · · · · · · · · | <u>Fee (\$)</u><br>100      | rees r      | Paid (\$)                |
| *  |                      | 50 500             | 250                         | 200                                   | 65                          |             |                          |
|  | -                    | 00 100             | 50                          | 130                                   | 80                          |             |                          |
|  | -                    | 00 300             | 150                         | 160                                   | • -                         |             |                          |
|  |                      | 50 500             | 250                         | 600                                   | 300                         |             |                          |
|  | 00 1                 | 00 0               | 0                           | 0                                     | 0                           |             | O !! 5+i4.               |
| 2. EXCESS CLAIM FEES   |                      |                    |                             |                                       |                             | Fee (\$)    | Small Entity<br>Fee (\$) |
| Fee Description Each claim over 20 (including Re   | issues)              |                    |                             |                                       |                             | 50          | 25                       |
| Each independent claim over 3 (including Reissues)   |                      |                    |                             |                                       |                             |             | 100                      |
| Multiple dependent claims  |                      | •                  |                             |                                       |                             | 360         | 180                      |
| Total Claims Extra Claims  | Fee (\$)             | Fee                | Paid (\$)                   | M                                     | ultiple Depende             | nt Claims   |                          |
| 27 - 20 = 5  |                      | _                  | 25.00                       | <u>Fe</u>                             | e (\$) <u>F</u>             | ee Paid (\$ | <u>5)</u>                |
| T to 01-1  | F (A)                | Faa                | Paid (\$)                   |                                       |                             |             | _                        |
| Indep. Claims 3 -3 =   | Fee (\$)             | =                  | raiu (\$)                   |                                       |                             |             |                          |
| 3. APPLICATION SIZE FEE  |                      |                    |                             |                                       |                             |             |                          |
| If the specification and drawings  | exceed 100           | sheets of paper    | (excluding el               | ectronically fi                       | iled sequence or            | computer    |                          |
| listings under 37 CFR 1.52(e   |                      |                    |                             |                                       | ntity) for each a           | dditional 5 | 0                        |
| sheets or fraction thereof. Se   |                      |                    |                             |                                       | ( For (t)                   | Ean I       | Daid (¢)                 |
| Total Sheets Extra Sh  |                      | Number of each     |                             |                                       |                             | <u> </u>    | Paid (\$)                |
| 100 =<br>4. OTHER FEE(S)   | /50                  |                    | (round up to a              | whole number)                         | <b>*</b> —— •               | Fees        | Paid (\$)                |
| Non-English Specification, \$  | 130 fee (no          | small entity disc  | count)                      |                                       |                             | = :         |                          |
| Other (e.g., late filing surcharge): 2251 Extension for response within first month 2202 Claims in excess of twenty 125.00 |                      |                    |                             |                                       |                             |             |                          |
|  | 2202                 | Tanno in CACCO     | O OI WOULD                  |                                       |                             |             |                          |

| SUBMITTED BY      | 11              |    |                                   |        |           |                |
|-------------------|-----------------|----|-----------------------------------|--------|-----------|----------------|
| Signature         | 14              | // | Registration No. (Attorney/Agent) | 47,255 | Telephone | (202) 955-3750 |
| Name (Print/Type) | Brian K. Dutton |    |                                   |        | Date      | March 2, 2006  |